



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: January 1 - March 1 • **Filing Fee:** \$50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 55354		2. Name of Corporation Arnold W. Buono Companies, Inc.			
3. Street Address Principal Business Office 156 Widow Sweets Road			City Exeter	State RI	Zip 02822
4. Business Phone No. (401) 421-4554		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island <i>Bakery</i>					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Janice A. Buono			Vice President Name Daniel C. Amadio		
Street Address 156 Widow Sweets Road			Street Address 154 Ashley Street		
City Exeter	State RI	Zip 02822	City Cranston	State RI	Zip 02920
Secretary Name Frank M. Buono			Treasurer Name Arnold W. Buono		
Street Address 84 Myrtle Avenue			Street Address 156 Widow Sweets Road		
City Cranston	State RI	Zip 02910	City Exeter	State RI	Zip 02822
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Julie E. Buono			Director Name		
Street Address 84 Myrtle Avenue			Street Address		
City Cranston	State RI	Zip 02910	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares 900	Class/Series Common	Par Value No Par

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

File Date **FILED**

Check No. **FEB 04 2009**

By: *[Signature]*

FOR SECRETARY OF STATE USE ONLY

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CORPORATIONS DIVISION
2009 FEB -4- PM 3:30

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

[Signature]
Signature
ARNOLD W. BUONO
Print or Type Name
Treasurer
Date 1-29-09